



**MICHELE
REAGAN**
Secretary of State

**State of Arizona – Office of the Secretary of State
Combined Certificate of Limited Partnership &
Statement of Qualification to be a Limited
Liability Partnership, A.R.S. § 29-308(C)**

SEND BY MAIL TO:

Secretary of State Michele Reagan, Atten: Limited Partnerships
1700 W. Washington Street, FL. 7, Phoenix, AZ 85007-2808

OR return this application in person:

PHOENIX - State Capitol Executive Tower, 1700 W. Washington Street, 1st Fl., Room 103
TUCSON - Arizona State Complex, 400 W. Congress, 1st Fl., Suite 141

Office Hours: Monday through Friday, 8 a.m. to 5 p.m., except state holidays.

IN-PERSON ONLY - We accept major credit cards and bank debit cards.

PLEASE NOTE: All correspondence regarding this filing will be sent to the principal office identified on this certificate. This application must be submitted with a self-addressed, stamped envelope with applicable filing fees.

DO NOT WRITE IN THIS SPACE

FOR OFFICE USE ONLY
SOSBS ARS29308C REV. 3/12/2015

INSTRUCTIONS

A limited partnership may file a combined certificate of limited partnership and a limited liability partnership statement of qualification if the combined filing indicates in its heading or introductory paragraph that it contains both a certificate of limited partnership and a limited liability partnership statement of qualification. A.R.S. § 29-308(C)

When to use this form: To be filed when partnership is NOT ON RECORD with the Secretary of State.

Be Accurate: Complete all applicable fields on this form. Write legibly; or fill out this application online at www.azsos.gov and print it.

Questions? Call (602) 542-6187; in-state/toll-free (800) 458-5842.

Submission: Submit this certificate in duplicate (one original, one copy) with a self-addressed, stamped envelope with payment. Any other matters, please attach additional sheets with filing.

Filing Fee and Payment: \$10; Plus \$3 per page; Plus \$3 Statement of Qualification. If filing by mail, make checks or money orders payable to the: Secretary of State.

Processing: 2-3 weeks; expedited service (24-48 hours) available for an additional \$25.

Website: All forms are available on the Secretary of State's website, www.azsos.gov.

1. Partnership information

Name of the partnership *End the name with the words "Limited Partnership" or "L.P."*

Name of the Limited Liability Partnership *End the name with the words "Limited Liability Partnership" or "L.L.P."*

Name of the Limited Liability Limited Partnership *End the name with the words "Limited Liability Limited Partnership" or "L.L.L.P."*

Arizona address of chief executive office (P.O. Box or C/O are unacceptable)

Phone number (include area code)

()

City

State

AZ

Zip Code

2. Agent for service of process information

Agent for service of process

Phone number (include area code)

()

Arizona address of agent (P.O. Box or C/O are unacceptable)

City

State

Zip Code

AZ

3. The Names, Addresses, and Signatures of each general partner:

Name of General Partner

Street Address

City

State

Zip Code

Signature

Month

Day

Year

Name of General Partner

Street Address

City

State

Zip Code

Signature

Month

Day

Year

Name of General Partner

Street Address

City

State

Zip Code

Signature

Month

Day

Year